



Please type or print in ink.

NAME OF FILER (LAST) 2013 MAR 22 AM 11:30 (FIRST) MARIE
RIOS RAMONA (Mona) MARIE
CITY OF NATIONAL CITY

1. Office, Agency, or Court

Agency Name

National City Council/Community Development Commission-Housing Authority of the City of National City

Division, Board, Department, District, if applicable

Your Position

Board

Councilmember, City of National City

► If filing for multiple positions, list below or on an attachment.

Agency: (see attached)

Position:

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☒ County of San Diego

☒ City of National City, California

☐ Other _____

3. Type of Statement (Check at least one box)

☒ **Annual:** The period covered is January 1, 2012, through December 31, 2012.

☐ **Leaving Office:** Date Left ____/____/_____
(Check one)

-or-

The period covered is ____/____/_____, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ **Assuming Office:** Date assumed ____/____/_____
and office sought, if different than Part 1: _____

☐ The period covered is ____/____/_____, through the date of leaving office.

☐ **Candidate:** Election year _____ and office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 24

☐ **Schedule A-1 - Investments** - schedule attached

☐ **Schedule C - Income, Loans, & Business Positions** - schedule attached

☐ **Schedule A-2 - Investments** - schedule attached

☒ **Schedule D - Income - Gifts** - schedule attached

☐ **Schedule B - Real Property** - schedule attached

☐ **Schedule E - Income - Gifts - Travel Payments** - schedule attached

-or-

☐ **None - No reportable interests on any schedule**

herein and in any attached schedules is true and complete. I acknowledge

I certify under penalty of perjury under the laws of the State of California

Date Signed 03/15/2013

(month, day, year)

March 15, 2013

1. Multiple positions

- A. Successor Agency to the Community Development Commission as the National City Redevelopment Agency - Council
Position: Councilmember, City of National City
- B. Metropolitan Transit System – Board
Position: Director – Councilmember, City of National City
- C. Metropolitan Transit System – Ad Hoc Public Security
Position: Member – Councilmember, City of National City
- D. Heartland Communications Facility Authority – Board
Position: Commissioner – Councilmember, City of National City
- E. San Diego Association of Government – San Diego Regional Planning Committee
Position: Advisory Primary Member – MTS
- F. San Diego Association of Government – Bayshore Bikeway Working Group Meeting
Position: Member, Councilmember, City of National City

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Ramona Marie Rios

► NAME OF SOURCE (Not an Acronym)
National City Lions Club

ADDRESS (Business Address Acceptable)
P.O. Box 986 National City, CA 91951-0986

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non Profit Organization

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
06 / 02 / 12	\$ 25.00	Police Reserve Dinner
08 / 30 / 12	\$ 25.00	Installation of Officers
12 / 20 / 12	\$ 50.00	Holiday Dinner

► NAME OF SOURCE (Not an Acronym)
YMCA

ADDRESS (Business Address Acceptable)
1201 Paseo Magda, Chula Vista, Ca 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 28 / 12	\$ 15.00	Lunch/Meeting
06 / 06 / 12	\$ 15.00	Lunch Meeting
08 / 28 / 12	\$ 15.00	Lunch Meeting

► NAME OF SOURCE (Not an Acronym)
National City Chamber of Commerce

ADDRESS (Business Address Acceptable)
901 National City Blvd. National City, CA 91950

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
10 / 03 / 12	\$ 50.00	56th Navy Luncheon
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)
National City Mile of Cars

ADDRESS (Business Address Acceptable)
National City Blvd. National City, CA 91950

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Mile of Cars Dealership

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 20 / 12	\$ 50.00	Holiday Party
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)
YMCA

ADDRESS (Business Address Acceptable)
1201 Paseo Magda, Chula Vista, CA 91910

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
11 / 27 / 12	\$ 15.00	Lunch/Meeting
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE (Not an Acronym)
City of National City

ADDRESS (Business Address Acceptable)
1243 National City Blvd. National City, CA 91950

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 27 / 12	\$ 75.00	Chamber Installation
09 / 21 / 12	\$ 99.00	SCEDC 22nd Summit
____ / ____ / ____	\$ _____	_____

Comments: (2nd Page attached)

SCHEDULE D Income - Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Ramona Marie Rios

► NAME OF SOURCE (Not an Acronym)
Sheetmetal Workers Local 206

ADDRESS (Business Address Acceptable)
4594 Mission Gorge Place, San Diego, CA 92120

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 16 / 12	\$ 25.00	17th MLK Breakfast
03 / 30 / 12	\$ 25.00	Cesar Chavez Breakf.
/ /	\$	

► NAME OF SOURCE (Not an Acronym)
Neighborhood Market Association

ADDRESS (Business Address Acceptable)
Manchester Grand Hyatt - 1 Market Place, SD 92101

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 16 / 12	\$ 125.00	Annual Banquet
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____